

Supplemental Application Data Sheet

Application Information

Application Type:: National Phase
Subject Matter:: Utility
Suggested Group Art Unit:: N/A
CD-ROM or CD-R?:: None
Sequence submission?:: None
Computer Readable Form (CRF)?:: No
Title:: SYSTEMS AND METHODS FOR SPINAL SURGERY
Attorney Docket Number:: 101896-474
Request for Early Publication?:: No
Request for Non-Publication?:: No
Small Entity?:: No
Petition included?:: No
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Michael
Family Name:: Mahoney
City of Residence:: Middletown
State or Province of Residence:: RI
Country of Residence:: US
Street of mailing address:: 4 Gae Street
City of mailing address:: Middletown
State or Province of mailing address:: RI
Postal or Zip Code of mailing address:: 02842

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Sara
Family Name:: Dziedzic
City of Residence:: Brighton Dorchester
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 72 Euston Street 10 Coffey Street
City of mailing address:: Brighton Dorchester
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02135 02122

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Paul
Family Name:: Birkmeyer
City of Residence:: Marshfield
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 154 Partridge Brook Circle
City of mailing address:: Marshfield
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02050

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Timothy
Family Name:: Beardsley
City of Residence:: Kingston

State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 132 Indian Pond Road
City of mailing address:: Kingston
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02364

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Dale
Family Name:: Frank
City of Residence:: Fall River Taunton
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: ~~4980 North Main Street #501-287 Tremont Street~~
City of mailing address:: Fall River Taunton
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02720-02780

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Ron
Family Name:: Naughton
City of Residence:: Tiverton Westfield
State or Province of Residence:: RI NJ
Country of Residence:: US
Street of mailing address:: ~~5 Horizon Drive 515 Parkview Avenue~~
City of mailing address:: Tiverton Westfield
State or Province of mailing address:: RI NJ

Postal or Zip Code of mailing address:: 02878 07090

Correspondence Information

Correspondence Customer Number:: 021125

Representative Information

Representative Customer Number:: 021125

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	claims priority to	60/543,030	02/09/2004

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
World Intellectual Property Organization (WIPO)	PCT/US05/004136	02/09/05	Yes

Assignee Information

Assignee name:: DePuy Spine, Inc.

Street of mailing address:: 325 Paramount Drive

City of mailing address:: Raynham

State or Province of mailing address:: MA

Postal or Zip Code of mailing address:: 02767